

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ORIGINAL OR AMENDED STATEMENT OF ORGANIZATION FORM FOR BALLOT QUESTION COMMITTEES

1. Committee ID #:	Name and Address of Depositories or Intended Depositories of committee funds.
2. Type of Filing:	a. Official Depository
Original	First State Bank
Amendment to Items: Eff. Date:	16100 E. NINE MILE Rd PO BOX 305
3. Date Committee was Formed: <u>りひ・ソーロコ</u>	b. Secondary Depository Eastpointe MI 48021
4. Full Name of Committee: YES! For LAKEVIEW'S Kids Committee	
5. Acronym or Abbreviation (if any):	12. Complete if Committee is being registered to support or oppose a specific ballot proposal: Support or ☐ ⊈pose ☐
Complete Committee Mailing Address (May be PO Box):	If not a statewide proposal, list the county, city, township, village or school
20307 Erben St.	district involved. If multi-county, list the county where the greatest number of
St. Clair Shores MI 48081	voters eligible to vote on the proposal reside: 무역 , 그림
	Statewide 75
	County Multi: County:
7.Complete Committee. Street Address (May not be PO Box):	X Local: LAKeview School Brancher
20301 Erben St	
St. Clair Shores Mi 48081	Michigan Department of State Bureau of Elections only and does not apply to Ballot Question Committees that file with the County Clerk's office.
Committee Phone #: 5 <u>86 775-212</u> 8	The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to
Committee Fax #:	you free of charge to assist you in meeting this requirement.
Committee E-mail Address: Hhuyghe 89 @ aol. com	Committee and the respired as supports to another receive in evenes of
8. Treasurer Name and Complete Address:	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
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Roberta Parzynski 20307 Erben St	Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily.
	14. Verification: I/We certify that all reasonable diligence was used in the
St. Clair Shores MI 44081	preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically,
Phone #: 586 615-4593	we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by
E-mail Address: Pur 2ynsk; @ Comcast. net 9. Designated Record Keeper Name and Complete Address:	the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that
, ,	the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date below)
Tracey Huyghe 21019 Alexander	Current Treasurer:
St. Clair Shoves MI 48081	Cullent Heastlet.
1 31. CIA.1. ZYDYEZ MI 4808!	
	Tolute Itazza 10-9-07
Phone #: 57 6 775-2128	Designated Record Keeper (Required only if filing electronically):
E-mail Address: thuyghe 89 @ dol. com	
10. REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box; the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.	